IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System - G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR R. F. Lackey DATE 11-12-74 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Westwind Place - Shannon Acres

_____ S. R. No. _____

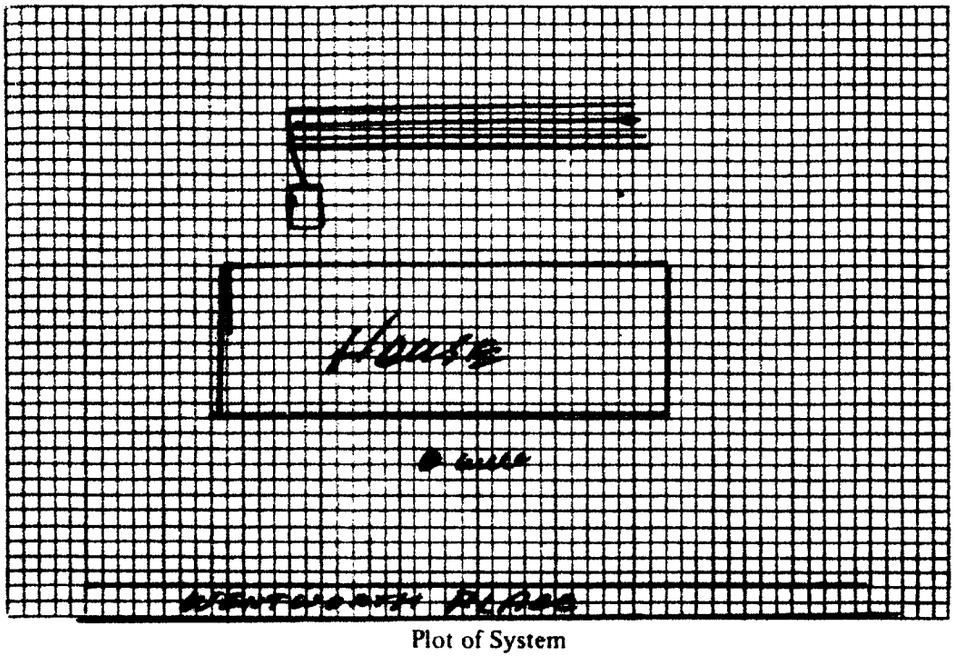
SUBDIVISION NAME Shannon Acres LOT NO. 96 SECTION OR BLOCK NO. _____

House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )
Lot Area ½ Acre

Character & Porosity of Soil Gullied Red Clay
Percolation Rate Slow
Topography Slope to creek
Depth to Water Table —
Rock or other impervious formations none



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 400 Linear Ft. 300
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Sam Stewart

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY [signature] DATE 11/12/74

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold